

MMAP - Emergency Response Initiative
Pre-Application Form

APPLICANT:

Name: _____ Soc. Sec.# _____
Property Address: _____ City: _____
State/Zip: _____ Years Living here: _____ Monthly Mortg: \$ _____
Home Phone No.: _____ Work Phone No.: _____
Other Phone No.: _____
Marital Status: (Check One) ☐ Married ☐ Unmarried (Check One) No. Dependents: _____
Legal Status: (Check One) ☐ US Citizen ☐ US Permanent Resident ☐ Other

Employer Name: _____ Years Working here: _____
Address: _____
Position: _____
Income: \$ _____ (Every two weeks, twice a month, monthly, quarterly, yearly) - Circle One
Other Income: \$ _____ per month (Alimony, child support, SSI, Retirement) - Circle One

CO-APPLICANT:

Name: _____ Soc. Sec.# _____
Current Address: _____ City: _____
State/Zip: _____ Years Living here: _____ Monthly Mortg Pmt\$ _____
Home Phone No.: _____ Work Phone No.: _____
Other Phone No.: _____
Marital Status: (Check One) ☐ Married ☐ Unmarried (Check One) No. Dependents: _____
Legal Status: (Check One) ☐ US Citizen ☐ US Permanent Resident ☐ Other

Employer Name: _____ Years Working here: _____
Address: _____
Position: _____
Income: \$ _____ (Every two weeks, twice a month, monthly, quarterly, yearly) - Circle One
Other Income: \$ _____ per month (Alimony, child support, SSI, Retirement) - Circle One

ASSETS:

Bank/Institution	Address	Balance
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

LIABILITIES (Loans & Credit Cards)

Creditor	Monthly Payment	Balance Due
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	_____

DECLARATIONS:**Borrower****Co-Borrower**

- | | | | |
|----|---|--|--|
| a. | Are there any outstanding judgments against you? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b. | Have you declared bankruptcy in the past 7 years? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c. | Do you have delinquent property taxes? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| d. | Do you have current property insurance against your home? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| e. | Are you party to a lawsuit? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| f. | Are you presently delinquent or in default on any Federal debt or any loan which resulted in foreclosure, transfer of title in lieu of foreclosure or judgment? (This would include such loans as home mortgage loans, SBA loans, home improvement loans, educational loans, any mortgage and financial obligations, bond or loan guarantee. If yes, provide details, including date, name and address of Lender, case number and if any, reason for action.) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| g. | Are you co-maker or endorser on a note? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| h. | Are you a U.S. citizen? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| i. | Are you a permanent resident alien? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| j. | Have you already applied for financial assistance with some other financial institution? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| k. | Have you received any kind of financial assistance due to the damage suffered by your home? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| l. | Were you occupying the property as your primary residence on 3/27/03? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

DISCLOSURE: THE UNDERSIGNED SPECIFICALLY ACKNOWLEDGE (S) AND AGREE (S) THAT: (1) THE LOAN REQUESTED BY THIS APPLICATION WILL BE SECURED BY AN INTEREST IN THE COLLATERAL DESCRIBED HEREIN; (2) THE COLLATERAL WILL NOT BE USED FOR ANY ILLEGAL OR PROHIBITED PURPOSE OR USE; (3) ALL STATEMENTS MADE IN THE APPLICATION ARE MADE FOR THE PURPOSE OF OBTAINING THE LOAN INDICATED HEREIN; (4) THE COLLATERAL PROPERTY WILL SERVE AS MY/OUR PRIMARY RESIDENCE; (5) THE LENDER, ITS AGENTS, SUCCESSORS AND ASSIGNS WILL RELY ON THE INFORMATION CONTAINED IN THE APPLICATION AND I/WE HAVE A CONTINUING OBLIGATION TO AMEND AND/OR SUPPLEMENT THE INFORMATION PROVIDED IN THIS APPLICATION IF ANY OF THE MATERIAL FACTS WHICH I/WE HAVE REPRESENTED HEREIN SHOULD CHANGE PRIOR TO CLOSING.

CERTIFICATION: I/WE CERTIFY, UNDER PENALTY OF PERJURY, THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT AS OF THE DATE SET FORTH OPPOSITE MY/OUR SIGNATURE(S) AND ACKNOWLEDGE MY/OUR UNDERSTANDING THAT ANY INTENTIONAL OR NEGLIGENT MISREPRESENTATION(S) OF THE INFORMATION CONTAINED IN THIS APPLICATION MAY RESULT IN CIVIL LIABILITY AND/OR CRIMINAL PENALTIES INCLUDING, BUT NOT LIMITED TO, FINE OR IMPRISONMENT OR BOTH UNDER THE PROVISIONS OF Title 18, UNITED STATES CODE, SECTION 1001, ET SEQ. AND LIABILITY FOR MONETARY DAMAGES TO THE LENDER, ITS AGENTS, SUCCESSORS AND ASSIGNS, INSURERS, AND ANY OTHER PERSON WHO MAY SUFFER ANY LOSS DUE TO RELIANCE UPON ANY MISREPRESENTATION WHICH I/WE HAVE MADE ON THIS APPLICATION.

AUTHORIZATION: I/WE HEREBY AUTHORIZE TO RELEASE TO METRO-MIAMI ACTION PLAN TRUST AND/OR ITS REPRESENTATIVES FOR VERIFICATION PURPOSES ONLY, INFORMATION REGARDING: (1) EMPLOYMENT HISTORY – DATES, INCOME, HOURS WORKED, ETC.; (2) BANKING INFORMATION OF RECORD; (3) OWNERSHIP TITLE FOR PROPERTY; (4) ANY OTHER INFORMATION DEEMED NECESSARY IN CONNECTION WITH A CONSUMER CREDIT REPORT FOR A REAL ESTATE TRANSACTION. THIS INFORMATION IS FOR THE CONFIDENTIAL USE TO DETERMINE ELIGIBILITY TO OBTAIN A SUBSIDIZED IMPROVEMENT LOAN.

I/WE UNDERSTAND THAT THE INFORMATION MAY BE SHARED WITH OTHER FEDERAL, STATE AND LOCAL GOVERNMENT DEPARTMENTS SUCH AS FEMA, LENDERS, IN AN EFFORT TO DETERMINE AND/OR OBTAIN THE BEST MORTGAGE FINANCE APPROVAL AVAILABLE FOR MY/OUR PRESENT SITUATION.

Applicant's Signature

Date

Co-Applicant's Signature

Date

DOCUMENTATION SUBMISSION WITH APPLICATION

1. Income Tax Returns 2001 & 2002 & W-2's
2. Most recent 2 paystubs
3. Copy of the two most recent bank statements
4. Proof of additional income (i.e., social security, pension fund, child support, etc.)
5. Copy of most recent monthly mortgage statement, if applicable
6. Copy of birth certificate, voter registration card, passport and/or permanent residency card
7. Copy of property deed; OR copy of 2002 Tax Bill
8. Copy of two current utility bills (as of March 27, 2003)
9. Money order or cashier's check for the amount of \$25 (application fee).
10. Copy of insurance policy, if applicable
11. Copy of Driver's license, birth certificate